FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

1472	387_					
OMB APPROVAL						
OMB Number:	3235-0076					
Expires: May 31, 2005						
Estimated average t	ourden					
hours per form	16.00					
SEC US	E ONLY					
Prefix	Seria					

DATE RECEIVED

[DE]

Name of Offering ([] check if this is an amendmen	nt and name has chan	ged, and indicate cl	nange.)		
LyfeSystems, Inc. Common Stock	[] D.J. 604	I 10.4.505	(V) D. J. 504	[]Costion 4(6)	(HROE
Filing Under (Check box(es) that apply): Type of Filing: X New Filing	[] Rule 504 [] Amendment	[] Rule 505	[X] Rule 506	[]Section 4(6)	[]ULOE
*	A. BASIC ID	ENTIFICATION	DATA		
1. Enter the information requested about the issu	ıer				
Name of Issuer ([] check if this is an amendment	and name has change	ed, and indicate cha	inge.)		144 1 166 148 1 41 1 10 1 44 1 16
LyfeSystems, Inc.	·				
	nber and Street, City,	State, Zip Code)	Telephone Number (In	I I Bill Berri ibbit saia.	1811 1980 81881 BUUR 1811 BA
1611 Water Street SW, Olympia, WA 98501			(206) 660-0146	- 0708	37459
	nber and Street, City,	State, Zip Code)	Telephone Number (Ir)· /	
(if different from Executive Offices)				//ODOOR	OORE
D. OD. 1 L. OD. 1					:SSED
Brief Description of Business			('	()	-
Service provider for healthcare transactions) IAN N :	7 2008
Type of Business Organization]	$M_{\rm s}$	2000
[X] corporation		ip, already formed	[Sther (please spec	MA
[] business trust	limited partnersh	•		CINIANI	CIAI
		Month Ye		, tiavila	CIAL
Actual or Estimated Date of Incorporation or Organ		[09] [07		X] Actual	[] Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-lette	er U.S. Postal Servi	ce abbreviation for State	:	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C 77d(6),

CN for Canada; FN for foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years:
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition, of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[] Promoter [X] Bend [] General and/or Managing Pa	eficial Owner artner	[X] Executive Officer	[X] Director
Full Name (Last name first, if indiv Ray, Randall E.				
Business or Residence Address (Nu	imber and Street, City, State, Zin	Code)		
c/o LyfeSystems, Inc., 1611 Wate				
Check Box(es) that Apply:		eficial Owner	[X] Executive Officer	[] Director
Full Name (Last name first, if indiv				
Payton, Robert	,			
Business or Residence Address (Nu	imber and Street, City, State, Zip	Code)		
c/o LyfeSystems, Inc., 1611 Wate				
Check Box(es) that Apply:		ficial Owner	[X] Executive Officer	[] Director
Full Name (Last name first, if indiv		400		
Brillhart, Lee	iduai)			
Business or Residence Address (Nu	imber and Street City State 7 in	Code)		
c/o LyfeSystems, Inc., 1611 Wate				
			(V) C	[] Director
Check Box(es) that Apply:	[] General and/or Managing Pa	ficial Owner artner	[X] Executive Officer	[] Director
Full Name (Last name first, if indiv	idual)			
Parker, Leslie				
Business or Residence Address (Nu				
c/o LyfeSystems, Inc., 1611 Wate				
Check Box(es) that Apply:	[] Promoter [] Bene [] General and/or Managing Pa	ficial Owner	[X] Executive Officer	[] Director
Full Name (Last name first, if indiv				
Mitchell, Mark	,			
Business or Residence Address (Nu	mber and Street, City State Zin	Code)	 	
c/o LyfeSystems, Inc., 1611 Water				
Check Box(es) that Apply:		ficial Owner	Executive Officer	X Director
Check Box(es) that repply.	General and/or Managing Pa		M Excedite Officer	-
Full Name (Last name first, if indiv	idual)			
Ray, Edworth L.	iddai)			
Business or Residence Address (Nu	mber and Street City State 7 in I	Code)		
c/o LyfeSystems, Inc., 1611 Water				
Check Box(es) that Apply:		eficial Owner	Executive Officer	[X] Director
Check Dox(es) that Apply.	[] General and/or Managing Pa		[] Executive Officer	[A] Director
Full Name (Last name first, if indiv	idual)	utilei_		
Sullivan, John	· · ·			
Business or Residence Address (Nu	mhar and Street City State 7in	Code		
Charle Day(sa) that Ambus			() [(X D:
Check Box(es) that Apply:	[] Promoter [] Benef [] General and/or Managing Pa	ficial Owner artner	[] Executive Officer	Director
Full Name (Last name first, if indiv			•	
Business or Residence Address (Nu	mber and Street, City, State, Zip (Code)		
	(Use blank sheet, or copy and	use additional copies of	this sheet, as necessary.)	

•					B. IN	FORMA	TION AI	BOUT O	FFERIN	G			
1.	Has the issue	r sold, or o	does the is:						offering? ing under l	JLOE.			Yes No
2.	What is the n	ninimum i	nvestment	that will b	e accepted	from any	individual'	?					\$ Not Applicable
3.	Does the offe	ering perm	it joint ow	nership of	a single ur	nit?					N	ot Applical	Yes No ble [][]
4.		n for solici oker or de	tation of p aler registe	urchasers ered with t	in connect he SEC an	ion with said/or with a	ales of secu a state or s	urities in th tates, list t	ne offering he name of	If a personant the broke	on to be li r or deale	sted is an a r. If more t	or similar ssociated person or han five (5) persons to NONE
Full	l Name (Last n	ame first,	if individu	al)									NONE
Bus	iness or Reside	ence Addr	ess (Numb	er and Stre	et, City, S	State, Zip C	ode)						
Nar	ne of Associate	ed Broker	or Dealer										
	es in Which Po			المامانية المامانية	4	-1:-:: D1							
Siai	es in which Pe	erson Liste	a Has Soi	icited or in	tends to S	oncit Purci	nasers						
	(Check	"All State:	s" or check	c individua	l States)	••••••••				••••••			[] All States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] (TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL) M() (OH) (WV)	[GA] [MN] [OK] [WI]	[H1] MS] [OR] [WY]	(ID) [MO] [PA] [PR]
Full	Name (Last n				[IA]	[01]	[41]	[VA]	[WA]	[** *]			[FK]
Bus	iness or Reside	ence Addr	ess (Numb	er and Stre	et, City, S	tate, Zip C	ode)						
Nan	ne of Associate	ed Broker	or Dealer								•		
Stat	es in Which Pe	erson Liste	d Has Sol	icited or In	tends to Se	olicit Purcl	nasers					-	
	(Check	"All States	s" or check	c individua	l States)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*******************	•••••					[] All States
Full	[AL] [IL] [MT] [RI] Name (Last n	[AK] [IN] [NE] [SC] ame first,	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[H1] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
	iness or Reside				et City S	tota Zin C	oda)						
				ет шіц эпс	et City, 3								
Nan	ne of Associate	d Broker	or Dealer									_	
Stat	es in Which Pe	rson Liste	d Has Soli	icited or In	tends to Sc	olicit Purch	asers						
	(Check	"All States	or check	individua	States)		***************************************	***************************************		*******************		***************************************	[] All States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID) [MO] [PA] [PR]
			(Use blank	sheet, or o	opy and u	se addition	al copies o	f this sheet	i, as necess	sary.)		

SEC 1972 (1/94)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security		Aggregate Offering Price	Amount Already Sold
	Debt	\$		\$
	Equity	s	11,650	\$11,650
	[X] Common [] Preferred			•
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests	\$		\$
	Other (specify)	s		\$
	Total	\$	11,650	\$11,650(1)
	Answer also in Appendix, Column 3, if filing Under ULOE			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
			Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		investors 10	\$ 11.650
	Non-accredited Investors			\$S
	Total (for filings Under Rule 504 Only)			•
	•			<u> </u>
	Answer also in Appendix, Column 4 if filing under ULOE			
3.	If this filing is for an offering Under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.			
	Type of offering		Type of Security	Dollar Amount Sold
	Rule 505			\$
	Regulation A			\$
	Rule 504			\$
	Total			\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate			
	Transfer Agent's Fees		f1	s
	Printing and Engraving Costs			\$
	Legal Fees			\$ 5,000
	Accounting Fees			\$
	Engineering Fees			S
	Sales Commissions (Specify finder's fees separately)			\$
	Other Expenses (identify): Blue Sky Fees			\$ 600
	Total			\$ 5,600
	• • • • • • • • • • • • • • • • • • •			

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

(1) \$9,400 worth of Intellectual Property was paid for the shares of Common Stock, the remainder was paid in cash.

	 b. Enter the difference between the aggregate offering price given in r Question 1 and total expenses furnished in response to Part C – Q difference is the "adjusted gross proceeds to the issuer." 	uestion 4.a. This			sG_OSO
5.	Indicate below the amount of the adjusted gross proceeds to the proposed to be used for each of the purposes shown. If the amount if not known, furnish an estimate and check the box to the left of the est of the payments listed must equal the adjusted gross proceeds to the response to Part C — Question 4.b above.	or any purpose is timate. The total			·
	·			ts to Officers, s, & Affiliates	Payments To Others
	Salaries and fees	[]	\$	[]	\$
	Purchase of real estate	[]	\$	[]	\$
	Purchase, rental or leasing and installment of machinery and equi	pment []	\$	[1	\$
	Construction or leasing of plant buildings and facilities		\$	[]	\$
	Acquisition of other businesses (including the value of securitie offering that may be used in exchange for the assets of securissuer pursuant to a merger)	urities of another	\$		\$
	Repayment of indebtedness		\$	[]	\$
	Working capital	[]	\$	[X]	s 6,050
	Other:	[]	\$	[]	\$
	Column totals	[]	\$	[X]	2 61020
	Total payments listed (column totals added)		[X] <u>\$</u>	6,5	<u>)50</u>
	D. FEDERAI	L SIGNATURE		-	
constitu	uer has duly caused this notice to be signed by the undersigned duly authorites an undertaking by the issuer to furnish to the U.S. Securities and Excluer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 50.	hange Commission,			
	Print or Type) LyfeSystems, Inc.	Signature/	2	7	Date 12-18-07
Name o	f Signer (Print or Type)	Title of Signer (Pri	int or Type)	,	, ,
1	Lee Brillhart	Chief Operatir	ig Officer		

Attention

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)